

OFFICE OF INSURANCE AND SAFETY FIRE COMMISSIONER

JOHN W. OXENDINE
COMMISSIONER OF INSURANCE
SAFETY FIRE COMMISSIONER
INDUSTRIAL LOAN COMMISSIONER
COMPTROLLER GENERAL

Seventh Floor, West Tower 2 Martin Luther King Jr. Dr. Atlanta, Georgia 30334 404-656-2056 TDD# 404-656-4031 www.gainsurance.org

TURN PAGE OVER

WATER-BASED FIRE PROTECTION SYSTEMS NON-COMPLIANCE REPORTING FORM

Submit with Shop Drawing(s) & Print or type all information

This form is to be used when a Georgia Registered Professional Engineer or Georgia Registered Architect's water-based fire protection drawing(s) of record compel a sprinkler contractor to develop code deficient shop drawings that are used for fabrication and installation. This form must be submitted with any and all code deficient shop drawing(s) or this office will assume and therefore hold the Certificate of Competency Holder and/or Designer and/or Sprinkler Contractor responsible for all deficiencies.

List the name(s) of the Engineer or Architect of record that stamped and sealed the non-code compliant water-based fire protection system drawings and/or specifications

Number and list <u>each</u> non-code deficiency separately and explain each deficiency in as much detail as possible. Reference the code and/or standard each deficiency violates and the year edition of the code and/or standard it violates (ensure the year edition referenced is the current code/standard adopted by the Insurance and Safety Fire Commissioner). The submitted shop drawings shall indicate each area where these deficiencies occur and shall be noted on the shop drawings to correspond with the numbered deficiencies shown on this form.

Facility Name:	
	_ County:
Sprinkler Contractor's Name (Print):	
Certificate of Competency's Name (Print): _	
Certificate of Competency's Signature:	
Certificate of Competency's State License Nu	mber:

Form 120-3-19-.10 (Part 1 of 2)

P.E.'s Name (If Applicable):
P.E.'s Georgia Registration Number:
Business Name:
Business Address:
Business Telephone Number:
Architect's Name (If Applicable):
Architect's Georgia Registration Number:
Business Name:
Business Address:
Business Telephone Number:
Deficiencies:
(1)

Attach extra sheets of paper as necessary to list all deficiencies.